Inmate Health Care Communication

730.1 PURPOSE AND SCOPE

The purpose of this policy is to establish and maintain effective communication between the treating qualified health care professionals and custody personnel. This communication is essential at all levels of the organization to ensure the health and safety of all occupants of the facility.

730.2 POLICY

It is the policy of this office that effective communication shall occur between the Chief Deputy of Corrections and the treating qualified health care professionals regarding any significant health issues of an inmate. All health issues should be considered during classification and housing decisions in order to preserve the health and safety of the occupants of this facility.

When a qualified health care professional recognizes that an inmate will require accommodation due to a medical or mental health condition, custody personnel shall be promptly notified in writing.

The Chief Deputy of Corrections shall be responsible for establishing measurable goals relating to processes that enhance good communication between the qualified health care professionals and the custody staff. The Chief Deputy of Corrections should also establish, in writing, the desired performance objectives relating to practices that support good communication between the qualified health care professionals and the custody staff. The Chief Deputy of Corrections should review the documents annually for any necessary revisions or updates in support of continuous improvement in the delivery of health care services.

730.3 MANAGING SPECIAL NEEDS INMATES

Upon an inmate’s arrival at the facility, the qualified health care professional, in consultation with the custody staff, should determine if the inmate has any special needs.

(a) If staff determines that an inmate has special needs, a communication form or other appropriate documentation relating to special needs should be completed and sent to classification personnel, the Shift Supervisor and the housing officer. This is to ensure that the inmate is assigned to a housing unit that is equipped to meet his/her special needs.

(b) The qualified health care professional should arrange for the appropriate follow-up evaluation.

(c) The health care of special needs inmates should be continuous and ongoing. At a minimum, the inmate should be seen by the contract medical provider or a qualified health care professional at least once every 90 days to evaluate his/her continued designation as a special needs inmate.

(d) Inmates who have been determined by qualified health care professionals to require a special needs classification should be seen at least once monthly by a qualified health care professional.

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(e) Prior to transfer to another facility, a medical transfer summary should be completed detailing any special requirements that should be considered while the inmate is in transit and upon his/her arrival at the destination. Discharge planning should be included, as appropriate.

(f) A treatment plan should be developed for each inmate and should include, at a minimum:

1. The frequency of follow-up for medical evaluation and anticipated adjustments of the treatment modality.
2. The type and frequency of diagnostic testing and therapeutic regimens.
3. When appropriate, instructions about diet, exercise, adaptation to the correctional environment and using prescribed medications.

(g) When clinically indicated, the qualified health care professionals and the custody personnel should consult regarding the condition and capabilities of inmates with known medical and/or psychiatric illnesses or developmental disabilities prior to any of the following:

1. Housing assignment
2. Program or job assignment
3. Admissions to, and transfers from or between institutions
4. Disciplinary measures for mentally ill patients

(h) Qualified health care professionals and custody personnel should communicate about inmates who require special accommodation. These include, but are not limited to, inmates who are:

1. Chronically ill
2. Undergoing dialysis
3. In an adult facility, as an adolescent
4. Currently in treatment for a communicable disease
5. Physically disabled
6. Pregnant
7. Frail or elderly
8. Terminally ill
9. Mentally ill or suicidal
10. Developmentally disabled

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730.4 NOTIFICATION TO SUPERVISORS

In the event that there is no mutual agreement regarding an individual or group of inmates who require special accommodation for medical or mental health conditions, supervisors in the respective chain of command within the health care and custody staff should address these issues.

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